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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/598,482			ling Date 06/2007	To be Mailed		
	AF	PPLICATION			OTHER THAN SMALL ENTITY OR SMALL ENTITY								
一	FOR		NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)	Т	RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1.16(a), (b), o	or (c))	N/A		N/A		N/A		1	N/A			
	SEARCH FEE (37 CFR 1.16(k), (i), o		N/A		N/A		N/A			N/A			
	EXAMINATION FE (37 CFR 1.16(o), (p), (N/A		N/A		N/A]	N/A			
	TAL CLAIMS CFR 1.16(i))	<u></u>	minus 20 =		*		x \$ =		OR	x \$ =			
	DEPENDENT CLAIM CFR 1.16(h))		minus 3 =		*		x \$ =]	x \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addi	If the specification and drawings excesheets of paper, the application size for \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereo 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.										
	MULTIPLE DEPEN	NDENT CLAIM PF	7 CFR 1.16(j))]]						
* If f	* If the difference in column 1 is less than zero, enter "0" in column 2.]	TOTAL			
	APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY					
LN:	01/23/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
AMENDMENT	Total (37 CFR 1.16(i))	* 13	Minus	** 35	= 0]	x \$ =		OR	X \$52=	0		
붊	Independent (37 CFR 1.16(h))	* 3	Minus	***4	= 0]	x \$ =		OR	X \$220=	0		
₩.	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR				
		,				• .	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0		
L		(Column 1)		(Column 2)	(Column 3)								
 -		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	*	Minus	**	=]	x \$ =		OR	x \$ =			
AMENDMENT	Independent (37 CFR 1.16(h))	*	Minus	***	=]	x \$ =		OR	x \$ =			
핍	Application Size Fee (37 CFR 1.16(s))]]				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR				
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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